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B1 (Official I	Form 1)(1/	(08)			טט	cumen	l Pi	age I o	1 /5			
			United No.			ruptcy of Illino		t			Voluntary	y Petition
	ebtor (if ind ire, Valer		er Last, First,	Middle):			Nam	e of Joint Do	ebtor (Spouse	e) (Last, First	, Middle):	
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):							used by the , maiden, and		in the last 8 years):			
Last four dig (if more than o	one, state all)		vidual-Taxpa	nyer I.D. (ITIN) No./	Complete E	IN Last	four digits of ore than one, s	of Soc. Sec. o	r Individual-T	Taxpayer I.D. (ITIN)	No./Complete EIN
Street Addre	ess of Debto		Street, City, a	and State)	:	am c .i		et Address of	f Joint Debtor	r (No. and Str	reet, City, and State):	am a .
						ZIP Code 60089						ZIP Code
County of Ro	esidence or	of the Princ	cipal Place of	f Business	S:	00003	Cour	nty of Reside	ence or of the	Principal Pla	ace of Business:	
Mailing Add	lress of Deb	otor (if diffe	erent from stre	eet addres	ss):		Mail	ing Address	of Joint Deb	tor (if differe	nt from street address):
					_	ZIP Code						ZIP Code
Location of l (if different f			siness Debtor ove):				l					
	Type of	f Debtor			Nature	of Business			Chapter	of Bankrup	otcy Code Under Wh	ich
		Organization)		_	`	one box)			the	Petition is Fi	iled (Check one box)	
	(Check	one box)		_	lth Care Bu		dofinad	Chapt		П с	15 D 6	D '''
■ Individua	al (includes	Joint Debte	ors)		1 U.S.C. §	eal Estate as 101 (51B)	dermed	Chapt			hapter 15 Petition for a Foreign Main Proc	
	•	ige 2 of this	•	Rail				☐ Chapt			hapter 15 Petition for	C
☐ Corporat		es LLC and	LLP)		kbroker modity Br	oker		☐ Chapt			a Foreign Nonmain I	0
Partnersh	•				ring Bank	SKCI						
Other (If check this		t one of the al te type of enti		Othe	er						e of Debts	
			,,			mpt Entity		■ Debts	are primarily c		k one box)	ots are primarily
				unde	tor is a tax- er Title 26 o	exempt orgof the Unite	anization d States	defined "incuri	d in 11 U.S.C. red by an indiv onal, family, or	§ 101(8) as idual primarily	busi	iness debts.
		Filing F	ee (Check on	ne box)				k one box:		Chapter 11		
Full Filin	ng Fee attac	ched									s defined in 11 U.S.C. or as defined in 11 U.S.	
Filing Fe	ee to be paid	d in installm	nents (applica e court's cons	ble to ind	lividuals on	ly). Must hat the deb	Che	k if:				
			istallments. R					Debtor's to insider	aggregate no s or affiliates	ncontingent li are less that	iquidated debts (exclu n \$2,190,000.	ding debts owed
			plicable to cl				Chec	k all applica		,	. , ,	
attach sig	gned applic	ation for the	e court's cons	ideration.	See Official	Form 3B.] Acceptan		n were solici	on. ted prepetition from c with 11 U.S.C. § 1126	
Statistical/A				C 11	1		11.			THIS	SPACE IS FOR COUR	Γ USE ONLY
			l be available exempt prop					ses naid				
there will	l be no fund	ds available	for distributi	on to uns	ecured cred	litors.	те схреп	ses paid,				
Estimated No		Creditors	П			П	П	П				
1- 40	50-	100-	200-	1,000-	5,001-	10,001-	25,001-	50,001-	OVER			
49 Estimated As	99	199	999	5,000	10,000	25,000	50,000	100,000	100,000	-		
Estimated As	ssets											
\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1	\$1,000,001 to \$10	\$10,000,001 to \$50	\$50,000,001 to \$100	\$100,000,0 to \$500		More than			
		,		million	million	million	million			4		
Estimated Li	labilities											
\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million		01 \$500,000,001 to \$1 billion				

Case 08-04222 Doc 1 Filed 02/25/08 Entered 02/25/08 14:30:27 Desc Main 2/25/08 2:39PM

Document Page 2 of 75 B1 (Official Form 1)(1/08) Page 2 Name of Debtor(s): Voluntary Petition Gangware, Valerie S. (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Location Date Filed: Where Filed: - None -Location Case Number: Date Filed: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X <u>/s/ David M. Siegel</u> February 25, 2008 Signature of Attorney for Debtor(s) (Date) David M. Siegel Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

B1 (Official Form 1)(1/08)

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Gangware, Valerie S.

Voluntary Petition

(This page must be completed and filed in every case)

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Valerie S. Gangware

Signature of Debtor Valerie S. Gangware

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

February 25, 2008

Date

Signature of Attorney*

X /s/ David M. Siegel

Signature of Attorney for Debtor(s)

David M. Siegel #06207611

Printed Name of Attorney for Debtor(s)

David M. Siegel & Associates

Firm Name

790 Chaddick Drive Wheeling, IL 60090

Address

(847) 520-8100

Telephone Number

February 25, 2008

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

Name of Debtor(s):

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Date

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

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Official Form 1, Exhibit D (10/06)

United States Bankruptcy Court Northern District of Illinois

		Not therm District of Initiols		
In re	Valerie S. Gangware		Case No.	
		Debtor(s)	Chapter	7
		Debtor(s)	Chapter	

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.] ____

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

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Official Form 1, Exh. D (10/06) - Cont.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable
statement.] [Must be accompanied by a motion for determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or
mental deficiency so as to be incapable of realizing and making rational decisions with respect to
financial responsibilities.);
Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, o
through the Internet.);
☐ Active military duty in a military combat zone.
☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.
I certify under penalty of perjury that the information provided above is true and correct.
Signature of Debtor: /s/ Valerie S. Gangware
Valerie S. Gangware
Date: February 25, 2008

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B6 Summary (Official Form 6 - Summary) (12/07)

United States Bankruptcy Court Northern District of Illinois

In re	Valerie S. Gangware		Case No.	
_		Debtor		
			Chapter	7
			•	

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	3	18,445.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		15,000.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	3		10,969.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	26		419,315.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			4,554.00
J - Current Expenditures of Individual Debtor(s)	Yes	2			4,556.00
Total Number of Sheets of ALL Schedu	ules	41			
	T	otal Assets	18,445.00		
			Total Liabilities	445,284.00	

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Form 6 - Statistical Summary (12/07)

United States Bankruptcy Court Northern District of Illinois

In re	Valerie S. Gangware		Case No.		
-		Debtor ,			
			Chapter	7	

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. \S 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	10,969.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	14,350.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	25,319.00

State the following:

Average Income (from Schedule I, Line 16)	4,554.00
Average Expenses (from Schedule J, Line 18)	4,556.00
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	5,010.53

State the following:

State the lone wing.		
Total from Schedule D, "UNSECURED PORTION, IF ANY" column		1,000.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	10,969.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		419,315.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		420,315.00

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B6A (Official Form 6A) (12/07)

In re	Valerie S. Gangware	Case No.	
-	-	, Debtor	

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Current Value of Husband, Debtor's Interest in Wife, Nature of Debtor's Amount of Description and Location of Property Property, without Interest in Property Joint, or Secured Claim Deducting any Secured Claim or Exemption Community

None

Sub-Total > 0.00 (Total of this page)

0.00 Total >

(Report also on Summary of Schedules)

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B6B (Official Form 6B) (12/07)

In re	Valerie S. Gangware	Case No.	
_		Debtor	

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
1.	Cash on hand	X		
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	Checking/Savings Account TCF Bank	-	145.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	Security Deposit	-	1,350.00
4.	Household goods and furnishings, including audio, video, and computer equipment.	T.V., Furniture	-	700.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X		
6.	Wearing apparel.	Normal Apparel	-	500.00
7.	Furs and jewelry.	Jewelry	-	100.00
8.	Firearms and sports, photographic, and other hobby equipment.	x		
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X		
10.	Annuities. Itemize and name each issuer.	X		

2 continuation sheets attached to the Schedule of Personal Property

2,795.00

Sub-Total >

(Total of this page)

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 $B6B\ (Official\ Form\ 6B)\ (12/07)$ - Cont.

In re	Valerie S. Gangware	Case No.

Debtor

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		ERISA Qualified 401(k)	-	800.00
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.		Child Support	-	850.00
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
				Sub-Tota	al > 1,650.00
			(To	otal of this page)	

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

 $B6B\ (Official\ Form\ 6B)\ (12/07)$ - Cont.

In re	Valerie S. Gangware	Case No.
		•

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	_	08 Nissan Versa ar Nissan	-	14,000.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	X			

Sub-Total > (Total of this page)

14,000.00

Total >

18,445.00

Sheet <u>2</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

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Debtor claims the exemptions to which debtor is entitled under:

Document

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☐ Check if debtor claims a homestead exemption that exceeds

B6C (Official Form 6C) (12/07)

In re	Valerie S. Gangware	Case No.	
		,	

Debtor

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

(Check one box) ☐ 11 U.S.C. §522(b)(2) ■ 11 U.S.C. §522(b)(3)	\$136,875.		
Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Checking, Savings, or Other Financial According/Savings Account TCF Bank	ounts, Certificates of Deposit 735 ILCS 5/12-1001(b)	145.00	145.00
Security Deposits with Utilities, Landlords, Security Deposit	and Others 735 ILCS 5/12-1001(b)	1,350.00	1,350.00
Household Goods and Furnishings T.V., Furniture	735 ILCS 5/12-1001(b)	700.00	700.00
Wearing Apparel Normal Apparel	735 ILCS 5/12-1001(a)	500.00	500.00
Furs and Jewelry Jewelry	735 ILCS 5/12-1001(b)	100.00	100.00
Interests in IRA, ERISA, Keogh, or Other Pe ERISA Qualified 401(k)	ension or Profit Sharing Plans 735 ILCS 5/12-704	800.00	800.00
Alimony, Maintenance, Support, and Prope Child Support	rty Settlements 735 ILCS 5/12-1001(b)	850.00	850.00

735 ILCS 5/12-1001(c)

6,845.00 18,445.00 Total:

2,400.00

<u>Automobiles, Trucks, Trailers, and Other Vehicles</u> 2008 Nissan Versa

Star Nissan

14,000.00

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B6D (Official Form 6D) (12/07)

In re	Valerie S. Gangware	Case No.	
_		Debtor	

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	E N	UNLLQUIDAT	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.			11/07-12/07	┑┑	T E D			
Star Nissan 5757 West Touhy Niles, IL 60714	х	-	Auto Loan/Purchase Money Security 2008 Nissan Versa Star Nissan		D			
			Value \$ 14,000.00				15,000.00	1,000.00
Account No.			Value \$ Value \$	-				
Account No.		H	, and \$	H				
			Value \$	-				
continuation sheets attached			S (Total of t	Subto			15,000.00	1,000.00
			(Report on Summary of Sc	To hed			15,000.00	1,000.00

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B6E (Official Form 6E) (12/07)

•		
In re	Valerie S. Gangware	Case No
-		Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian."

Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in the columns.) Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data. Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3).
■ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sale representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
■ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federa Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

^{*} Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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 $B6E\ (Official\ Form\ 6E)\ (12/07)$ - Cont.

In re	Valerie S. Gangware		Case No.	
•		Debtor	,	

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Wages, salaries, and commissions

							TYPE OF PRIORITY	7 - -
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Hu Hu	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	COXF-XGEX	UZ LL QULDA	UTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY AMOUNT ENTITLED TO PRIORITY
Account No. 07-003050			5/07	٦	A T E D			
Brian Schwartz 807 Christophers Street Plano, IL 60545		-	NOTICE ONLY					0.00
Account No.	╫		NOTICE ONLY	-			0.00	0.00
Dorothy Sanders 15934 Woodlawn South Holland, IL 60473		-						0.00
	_						0.00	0.00
Account No. 02003389 Kiran Patil 24115 Newcatle Street Plainfield, IL 60585		-	6/07 NOTICE ONLY					0.00
07.000054	4		F107				0.00	0.00
Account No. 07-002954 Tianne Kurn 18400 Fox Run Drive Elk Grove Village, IL 60007		-	5/07 NOTICE ONLY					0.00
							0.00	0.00
Account No.								
Sheet 1 of 2 continuation sheets at	tache	d to)	Sub	tota	ıl		0.00
Schedule of Creditors Holding Unsecured Pr				this	pag	ge)	0.00	0.00

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B6E (Official Form 6E) (12/07) - Cont.

In re	Valerie S. Gangware		Case No.	
-		Debtor	,	

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

2/25/08 2:39PM

TYPE OF PRIORITY Husband, Wife, Joint, or Community AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, ODEBTOR NL I QU I DATED ONTINGENT SPUTED AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** W INCLUDING ZIP CODE, AND CONSIDERATION FOR CLAIM OF CLAIM C AMOUNT ENTITLED TO PRIORITY AND ACCOUNT NUMBER (See instructions.) 2003 & 2005 Account No. **Federal Income Taxes** Internal Revenue Service 0.00 **Centralized Insolvency Operations** P.O. Box 21126 Philadelphia, PA 19114 10,969.00 10,969.00 Account No. Account No. Account No. Account No. Subtotal 0.00 Sheet **2** of **2** continuation sheets attached to (Total of this page) Schedule of Creditors Holding Unsecured Priority Claims 10,969.00 10,969.00 0.00 (Report on Summary of Schedules) 10,969.00 10,969.00

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B6F (Official Form 6F) (12/07)

In re	Valerie S. Gangware	Case No	
_		Debtor	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

Check this box if debtor has no creditors holding unsecure	ou c	iaiii	is to report on this schedule r.				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	Q U I	D I SPUTED	AMOUNT OF CLAIM
Account No. 061-1-0000638779			8/07 - 1/08	T	D A T E D		
Advanced Radiology Consultants 520 E. 22nd St. Lombard, IL 60148		-	Medical		D		2,792.00
Account No. 1000301913			Medical	+	┝	_	2,1 32.00
Advocate c/o Malcomb S. Gerald & Associates 332 S. Michigan Chicago, IL 60604		-	medical				
							380.00
Account No. Advocate Health Care PO Box 73208 Chicago, IL 60673		-	7/07 Medical				
							95.00
Account No. Advocate Health Care PO Box 73208 Chicago, IL 60673		_	1/08 Medical				
				L			100.00
25 continuation sheets attached			(Total of t	Subt			3,367.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Valerie S. Gangware		Case No.	
-		Debtor		

					_		
CREDITOR'S NAME,	Ç	Hu	sband, Wife, Joint, or Community	Ϊç	Ü	P	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	ΙU	DISPUTED	AMOUNT OF CLAIM
Account No. 320402639			3/06 -12/07	T	A T E D		
Advocate Lutheran General Hospital 1675 W. Dempster Park Ridge, IL 60068		-	Medical		D		151.00
Account No. 317415032			2/05 - 12/07	Т			
Advocate Lutheran General Hospital 1775 Dempster Street Park Ridge, IL 60068		-	Medical				269.00
Account No. 316043553		H	8/04 - 12/07	+	+	┢	
Advocate Lutheran General Hospital 1775 Dempster Street Park Ridge, IL 60068		-	Medical				220.00
Account No. 324857017			7/07 - 12/07				
Advocate Lutheran General Hospital 1775 Dempster Street Park Ridge, IL 60068		-	Medical				3,288.00
Account No. 324199777			8/07 -12/07	T	T	T	
Advocate Lutheran General Hospital 1775 Dempster Street Park Ridge, IL 60068		_	Medical				5,267.00
Sheet no. 1 of 25 sheets attached to Schedule of			,	Sub	tota	ıl	0.405.00
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	9,195.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Valerie S. Gangware		Case No	
•		Debtor		

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME,	Ç	Hu	sband, Wife, Joint, or Community	Co	Ü	Þ	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J H H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	NT I NG E N	NL I QU I DA	U T E	AMOUNT OF CLAIM
Account No. Multiple Accounts			Medical	Т	T E D		
Advocate Lutheran General Hospital 1775 Dempster Street Park Ridge, IL 60068		-			D		10,000.00
Account No. Multiple Account	┝		Medical	+	╁		.,
Advocate Medical Group 701 Lee St. Des Plaines, IL 60016		-					486.00
Account No. 600703569134 (multiple)			9/07 - 1/08				
Alexian Brothers 806 Biesterfeld Rd. Elk Grove Village, IL 60007		-	Medical				10,000.00
Account No. 13253393019386942 372263818491			3/94 -5/07				
American Express PO Box 981537 El Paso, TX 79998		-	Judgment				3,915.00
Account No. 13253393019392953 373020279592	╁		12/93-5/07	+	H	\vdash	·
American Express PO Box 981537 El Paso, TX 79998		_	NOTICE ONLY				0.00
Sheet no. 2 of 25 sheets attached to Schedule of				Sub	tota	ıl	24,401.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Valerie S. Gangware	Case	e No
_	_	Debtor ,	

				-	_	-	
CREDITOR'S NAME,		Hu	sband, Wife, Joint, or Community	C	U	P	
MAILING ADDRESS	CODEBTO	Н		C O N T	UNLLQUL	S	
INCLUDING ZIP CODE, AND ACCOUNT NUMBER	ВТ	W	CONSIDERATION FOR CLAIM. IF CLAIM	11	Q	Ų	AMOUNT OF CLAIM
(See instructions above.)	O R	С	IS SUBJECT TO SETOFF, SO STATE.	N G E N	טו	E	Thirdered of Clamin
Account No. 13253393019394928 378342309294	╁	╁	8/94-11/06	N T	A T E D		
Account No. 10233333013334320 370342303234	-		NOTICE ONLY		E		
American Express							
PO Box 981537		-					
El Paso, TX 79998							
							0.00
Account No. 3730-202795-91017	Ī		2/08				
	1		Purchases				
American Express Optima							
PO BOx 650448		-					
Dallas, TX 75265							
							5,608.00
	╀	L	200 - 200				3,000.00
Account No. 2070919029364309	4		2/07-5/07 NOTICE ONLY				
American General Finance			NOTICE ONLY				
463 N. Lake St.		_					
Mundelein, IL 60060-0604							
							0.00
Account No. 3338783972	t	T	NOTICE ONLY				
	1						
American National Bank & Trst							
628 Main Street		-					
Danville, VA 24541							
							0.00
	┺	_					0.00
Account No. 36161	1		Medical				
ATO Credit III C							
ATG Credit, LLC PO Box 14895		_					
Chicago, IL 60614							
O.11104g0, IL 000 17							
							856.00
Sheet no. 3 of 25 sheets attached to Schedule of	_			Subt	ota	<u> </u>	
Creditors Holding Unsecured Nonpriority Claims			(Total of t				6,464.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Valerie S. Gangware	Case	e No
_	_	Debtor ,	

					_	_	
CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	S	U	P	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A H		CONTINGEN	UNLIQUIDATED	SPUTED	AMOUNT OF CLAIM
Account No. 4678650093098 4366111020437351			12/07] ⊤	T		
	1		Purchases		D		
Bank One							
150 E. Campusview		-					
Worthington, OH 43235							
							18,972.00
Account No.			Medical				
Bergman Orthodics							
1860 John's Drive		-					
Glenview, IL 60025							
							1,000.00
Account No.	-		NOTICE ONLY				·
	1						
Bill Welnhofer							
227 West Monroe Street		-					
Suite 2100							
Chicago, IL 60606							
							0.00
Account No. 75420			NOTICE ONLY				
Blockbuster							
c/o Credit Protection Assoc., L.P.		_					
13355 Noel Rd.							
Dallas, TX 75240							
,							0.00
Account No.			607				
	1		Medical				
Bloomington Radiology							
PO Box 3668		-					
Bloomington, IL 61702							
					L		607.00
Sheet no. 4 of 25 sheets attached to Schedule of				Subt	ota	1	20.570.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	e)	20,579.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Valerie S. Gangware		Case No.	
_		Debtor		

					_	_	
CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	U	D	
MAILING ADDRESS	CODEBTO	н		CONT	UZLLQUL	S	
INCLUDING ZIP CODE,	₽	w	CONSIDERATION FOR CLAIM. IF CLAIM	1 1	Q	ַטַ	AMOUNTE OF CLARA
AND ACCOUNT NUMBER (See instructions above.)	0	C	IS SUBJECT TO SETOFF, SO STATE.	G	I	Ė	AMOUNT OF CLAIM
(See instructions above.)	R	Ľ		NGEN	D A	D	
Account No.			NOTICE ONLY	T	DATED		
					D		
Bob R. Krohn							
8650 West 165 Place		-					
Orland Park, IL 60462							
							0.00
Account No. 5544768947			Purchases				
BPM Amoco							
Processing Center		-					
Des Moines, IA 50360							
							100.00
Account No.			8/07 - 12/07				
	1		Medical				
Bromenn Regional Medical Center							
1304 Franklin Ave.		-					
Normal, IL 61761							
							12,473.00
Account No. 97719209	T		10/07-12/07				
	1		Medical				
Carle Clinic Assoc.							
P.O. Box 6002		-					
Urbana, IL 61803							
, and the second							
							3,045.00
Account No. 1553	H	H	Medical	\vdash		\vdash	
1100000001000	ł		Incarea.				
Centre for Women's Health							
21279 Network Place		-					
Chicago, IL 60673							
							58.00
		<u> </u>				<u></u>	
Sheet no. <u>5</u> of <u>25</u> sheets attached to Schedule of				Subt			15,676.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	nis]	pag	e)	<u> </u>

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B6F (Official Form 6F) (12/07) - Cont.

In re	Valerie S. Gangware		Case No.	
-		Debtor		

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	U	D	
MAILING ADDRESS	CODEBTO	н	DATE CLABAWAG NICHDRED AND	CONT	UZLLQUL	S	
INCLUDING ZIP CODE,	В	W	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	1 1	Q	U	
AND ACCOUNT NUMBER	T	C	IS SUBJECT TO SETOFF, SO STATE.	N G	U	ΤE	AMOUNT OF CLAIM
(See instructions above.)	Ř			NGEN	ט	D	
Account No. 963761			Medical	Ť	A T E D		
	1				D		
Certified Services							
PO Box 177		-					
Waukegan, IL 60079							
							10.00
Account No. 1014114	T		2/08				
	1		Medical				
Certified Services Inc							
PO Box 177		-					
Waukegan, IL 60079							
_							
							114.00
Account No. 1013814			2/08				
	1		Medical				
Certified Services Inc							
PO Box 177		-					
Waukegan, IL 60079							
Jan., - 2000							
							300.00
Account No. 436611102905	┢		05/78 - 11/07				
Account No. 430011102303	ł		Purchases				
Chase							
201 N. Walnut St.		_					
MAILSTOP DE1-1027							
Wilmington, DE 19801							
Willington, DE 13001							9,274.00
A	\vdash	_	00/02 04/02	_			5,2,4.00
Account No. 609300783972	ļ		08/02 - 01/03 Purchases				
			Purchases				
Chase							
N54 W 13600 Woodale Drive		-					
Menomonee Falls, WI 53051							
	l						
							39,174.00
Sheet no. 6 of 25 sheets attached to Schedule of				ubt	ota	1	40.070.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	e)	48,872.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Valerie S. Gangware		Case No.	
_		Debtor		

	С	Н	sband, Wife, Joint, or Community		Lu	Гр	Ī
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	NL QU L DA	DISPUTED	AMOUNT OF CLAIM
Account No. 4417-1295-3110-6181			12/98-7/07	٦т	T E		
Chase 201 N. Walnut St. MAILSTOP DE1-1027 Wilmington, DE 19801		-	Purchases		D		10,302.00
Account No. 4227-6510-2476-9423	╁		10/77-6/07	+	+	+	
Chase 201 N. Walnut St. MAILSTOP DE1-1027 Wilmington, DE 19801		-	Purchases				1,117.00
Account No. 5680302840013516	1		11/81-6/07	+	T	t	
Chase 201 N. Walnut St. MAILSTOP DE1-1027 Wilmington, DE 19801		-	Purchases				14,503.00
Account No. 07M103325	╁		2/08	+	+	+	
Chase Bank 131 S. Dearborn Fifth Floor Chicago, IL 60603		-	Purchases				11,500.00
Account No. 4366-1110-2905-7531	╁		5/78-6/07	+	+	+	
Chase BP 225 Chastain Meadows Court Kennesaw, GA 30144		-	Purchases				10,190.00
Sheet no. 7 of 25 sheets attached to Schedule of		_		Sub	tota	al	47.040.00
Creditors Holding Unsecured Nonpriority Claims			(Total of				47,612.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Valerie S. Gangware		Case No	
•		Debtor		

	C	ни	sband, Wife, Joint, or Community	1	Ιυ	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	DALIQUIDATED	S P	AMOUNT OF CLAIM
Account No. 855004266095			10/01 - 12/07	Т	E		
Citi Bank c/o: National Enterprise Systems 29125 Solon Rd Solon, OH 44139		-	Collections		В		853.00
Account No. 1014114	H		NOTICE ONLY	\dagger	H		
Computer Credit, Inc. 640 West Fourth Street PO Box 5238 Winston Salem, NC 27113-5238		-					0.00
Account No. 1013814			NOTICE ONLY				
Computer Credit, Inc. 640 West Fourth Street PO Box 5238 Winston Salem, NC 27113-5238		-					0.00
Account No. 1015977			Medical		t		
Condell Acute Care Centers c/o Computer Credit, Inc. 36866 Eagle Way Chicago, IL 60678		-					314.00
Account No. 1014114	╁		Medical	+	H	\vdash	
Condell Acute Care Centers c/o Computer Credit, Inc. 36866 Eagle Way Chicago, IL 60678		-					111.00
Sheet no. 8 of 25 sheets attached to Schedule of	-			Sub	tota	ıl	4 270 00
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	1,278.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Valerie S. Gangware		Case No.	
_		Debtor		

							_	
CREDITOR'S NAME,	C	Ηι	usband, Wife, Joint, or Community		Ü		1	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT		S P UT E C		AMOUNT OF CLAIM
Account No. 1013814			Medical	'	E			
Condell Acute Care Centers c/o Computer Credit, Inc. 36866 Eagle Way Chicago, IL 60678		_			В			282.00
Account No. 3840			NOTICE ONLY		T		T	
Credit Management Services 9525 Sweet Valley Drive Valley View, OH 44125		-						0.00
Account No.	t		Medical	\top	T	t	†	
David Chow, Chiropractic 1804 N. Arlington Hts Road Arlington Heights, IL 60004		-						1,000.00
Account No.			Personal Loan	T	T	T	1	
David Sanes 9451 Lockwood Ave Skokie, IL 60076		_						20,000.00
Account No. 6011-0071-9062-7108	T	T	8/99 - 12/07	\dagger	T	t	†	
Discover Card PO Box 15316 Wilmington, DE 19850-5316		-	Purchases					600.00
Sheet no. 9 of 25 sheets attached to Schedule of				Sub	tota	al		21,882.00
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pas	ge)	١	21,002.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Valerie S. Gangware		Case No	
•		Debtor		

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

	_			1.	1	_	
CREDITOR'S NAME, MAILING ADDRESS	CODEBTO	Hu	sband, Wife, Joint, or Community	CONFI	UZLLQUL	DISPUTE	
INCLUDING ZIP CODE,	E B	W	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	T	Į Q	P	
AND ACCOUNT NUMBER (See instructions above.)	T O	C	IS SUBJECT TO SETOFF, SO STATE.	N G E N	U	E	AMOUNT OF CLAIM
·	R		0.00 7.07	- ½	D A T E D	D	
Account No. 601100708060(8162) & (8762)			9/86-7/07 Purchases	'	Ė		
Discover Card			1 dionasco				1
PO Box 15316		-					
Wilmington, DE 19850-5316							
							22,000.00
				_			22,000.00
Account No.			NOTICE ONLY				
Doug Jones							
25050 Indian Trail		-					
Barrington, IL 60010							
							0.00
							0.00
Account No.			NOTICE ONLY				
Doug Wakley							
35 S. Barrington Road		-					
Barrington, IL 60010							
							0.00
Account No. 140000			Medical				
Dr. James Charrens							
Dr. James Chorzempa 1425 McHenry Road		_					
Suite 101							
Buffalo Grove, IL 60089							
							7,000.00
Account No.			Medical				
Dr. Mark Brandt 7900 N. Milwaukee		_					
Niles, IL 60714							
							2,000.00
Sheet no. 10 of 25 sheets attached to Schedule of				Sub	tota	1	04 000 00
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	e)	31,000.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Valerie S. Gangware		Case No.
_		Debtor	

Г	C	ш	sband, Wife, Joint, or Community	1	Ιυ	D	I
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	LQU	I S P U T E D	AMOUNT OF CLAIM
Account No.			2/08	Т	E		
Edgar Brand Gangware III 1726 Johnson Drive #223		-	Notice Only		D		
							0.00
Account No. 67-8711245	-		12/07 Medical				
Elk Grove Radiology 75 Remittance Dr., Ste. 6500 Chicago, IL 60675		-					
							371.00
Account No. ENH Medical Group			7/07 - 12/07 Medical				
P.O. Box 73208 Chicago, IL 60673		-					
							182.00
Account No. 7302855004266075 (multiple acc			12/07 Purchases				
Exxon Mobil PO Box 530962 Atlanta, GA 30353-0962		-					
							2,000.00
Account No. 4417-1295-3110-6181			Purchases				
First USA 201 N. Walnut St. 3 Christina Center (WACH-FDR)		-					
Wilmington, DE 19801							10,599.00
Sheet no. <u>11</u> of <u>25</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total o	Sub			13,152.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Valerie S. Gangware	Case	e No
_	_	Debtor ,	

				-	1	-	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H C		COXHLXGEX	Ü	DISPUTED	AMOUNT OF CLAIM
Account No. 34829857			06/03 - 08/07	Τ̈́	D A T E D		
FMCC 12110 Emmet Omaha, NE 68164		-	Auto Repossesion Ford Winstar		D		6,951.00
Account No.		H	NOTICE ONLY	T	H		
Frank Gangware 355 N. Delaplaine Road Riverside, IL 60546		-					0.00
Account No. 3774376812	┢		09/89 - 08/07	+	-		
GEMB/JCP P.O. Box 981402 El Paso, TX 79998		-	Purchases				1,334.00
Account No. 54370306-82855571			12/07	1			
GM Card PO Box 37281 Baltimore, MD 21297		-	Purchases				7,163.00
Account No. 154905634925	t		5/04-7/07				
GMAC Payment Processing Center PO Box 9001951 Louisville, KY 40290-1951		-	NOTICE ONLY				0.00
Sheet no. 12 of 25 sheets attached to Schedule of				Sub			15,448.00
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	13,440.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Valerie S. Gangware	Case No	
_		Debtor ,	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

	_		L LANGE LIVE OF THE STATE OF TH		T	_	1
CREDITOR'S NAME,	CODEBTO	l i	sband, Wife, Joint, or Community	CONTI	UNLLGUL	D I S P	
MAILING ADDRESS INCLUDING ZIP CODE,	E	H W	DATE CLAIM WAS INCURRED AND	Ϊ́	١	P	
AND ACCOUNT NUMBER	Ĭ	J	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	Ņ	ŭ	U T E	AMOUNT OF CLAIM
(See instructions above.)	R	С	is sobject to setort, so strile.	N G E N	D	5	
Account No.			8/07	∀	D A T E D		
	1		Medical	L	D		
Golf-Western Surgical Specialists							
8901 Golf Road		-					
Suite 305							
Des Plaines, IL 60016							
							98.00
Account No. 8355			Medical				
Golf-Western Surgical Specialists							
8901 Golf Road		-					
Suite 305							
Des Plaines, IL 60016							400.00
				\perp			100.00
Account No. 4681-2220-1270-0348			NOTICE ONLY				
Harris							
Bankcard Services		-					
PO Box 15288							
Wilmington, DE 19886-5288							0.00
				$oldsymbol{\perp}$			0.00
Account No. 36161			12/07				
			Medical				
Hochstadter & Isaacson Oral & Maxil							
600 West Lake Cook Road Suite 101		-					
Buffalo Grove, IL 60089							
Bullalo Grove, in 60003							6,000.00
				\bot	\vdash	L	0,000.00
Account No. 030682855571			3/97-5/07				
l			NOTICE ONLY				
HSBC NV							
P.O. Box 19360							
Portland, OR 97280							
							0.00
				丄			0.00
Sheet no. <u>13</u> of <u>25</u> sheets attached to Schedule of				Sub			6,198.00
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	e)	0,130.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Valerie S. Gangware		Case No.
_		Debtor	

CDEDITOR'S NAME	С	Hu	usband, Wife, Joint, or Community	С	U	Ti	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	C A M	IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDAT		P U T E	AMOUNT OF CLAIM
Account No. 9463419			Medical	T	T E D			
ICS Collection Service PO Box 646 Oak Lawn, IL 60454-0646		-			D			87.00
Account No. 7690004			Medical					
ICS Collection Service PO Box 646 Oak Lawn, IL 60454-0646		-						
								490.00
Account No. 9170350			Medical					
ICS Collection Service PO Box 646 Oak Lawn, IL 60454-0646		-						152.00
Account No. 9157135	-	_	Medical	\vdash	╀	+	\dashv	132.00
ICS Collection Service PO Box 646 Oak Lawn, IL 60454-0646		-	Medical					303.00
Account No. RA06999	t		Medical	T	H	\dagger	\dagger	
IL Bone & Joint Institute 135 S. LaSalle, Dept. 1052 Chicago, IL 60674-1052		_						220.00
Sheet no. 14 of 25 sheets attached to Schedule of	-	-		Sub	tota	al	7	1,252.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	1,252.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Valerie S. Gangware		Case No	
•		Debtor		

					_		
CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	U	P	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	UNLIQUIDATED	SPUTED	AMOUNT OF CLAIM
Account No.			NOTICE ONLY	T	T E		
Ivan Baker c/o UC Funding 146 2nd Street, Ste 200 Saint Petersburg, FL 33701		-			D		0.00
Account No.			NOTICE ONLY				
John Erwin 274 Ashland Court Buffalo Grove, IL 60089		-					0.00
Account No. 39303	Ͱ		Medical	\vdash			
Joseph Meis 100 Village Green #120 Lincolnshire, IL 60069		-					216.00
Account No. 5082147 017-9647-128			12/07				
Kohl's Department Store c/o: Merchants & Med. Credit Corp. 6324 Taylor Dr. Flint, MI 48507		-	Purchases				2,500.00
Account No. 17964712852			04/87-11/07				
Kohl/Chase N56 W17000 Ridgewood Dr. Menomonee Falls, WI 53051		-	Purchases				2,029.00
Sheet no. <u>15</u> of <u>25</u> sheets attached to Schedule of				Subt			4,745.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his j	pag	e)	.,. 70.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Valerie S. Gangware		Case No.	
•		Debtor	-7	

	_		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	10		_	Γ
CREDITOR'S NAME,	CODEBTO	1	sband, Wife, Joint, or Community	CONTI	コスコーのコー	DISPUTE	
MAILING ADDRESS INCLUDING ZIP CODE,	E	H W	DATE CLAIM WAS INCURRED AND	T	i i	P	
AND ACCOUNT NUMBER	B T	J	CONSIDERATION FOR CLAIM. IF CLAIM	I N	Q U	U T	AMOUNT OF CLAIM
(See instructions above.)	O R	С	IS SUBJECT TO SETOFF, SO STATE.	N G E N	I D	E D	THIS CITY OF CETHIN
Account No. 0416			NOTICE ONLY	- Ñ T	DATED		
					Ď		
Kur's Landscaping							
1516 N. Elmhurst Road		-					
Suite 130							
Mount Prospect, IL 60056							
							0.00
Account No. 021117635			Overdraft	T			
LaSalle Bank							
135 S. LaSalle		-					
Chicago, IL 60602-4105							
							3,000.00
Account No. 5308771087			Checking Overdraft				
LaSalle Bank							
135 S. LaSalle St.		-					
Chicago, IL 60603							
							700.00
Account No. 5309970779			Checking Overdraft				
LaSalle Bank							
135 S. LaSalle St.		-					
Chicago, IL 60603							
							400.00
							100.00
Account No. 322895848			2/07 - 12/07				
			Medical				
Lutheran General Hospital							
1775 Dempster		-					
Park Ridge, IL 60068							
							185.00
Sheet no. 16 of 25 sheets attached to Schedule of				Sub	tota	l	0.005.00
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	e)	3,985.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Valerie S. Gangware		Case No.	
•		Debtor	-7	

	<u></u>	ш.,	usband, Wife, Joint, or Community	Tc	111	Ь	1
CREDITOR'S NAME,	CODEBTOR			CONT	N	D I S P	
MAILING ADDRESS	ΙE	Н		l N	ŀ	I S	
INCLUDING ZIP CODE, AND ACCOUNT NUMBER	В	W	CONSIDERATION FOR CLAIM. IF CLAIM	I,	Q	U T E	AMOUNT OF CLAIM
(See instructions above.)	ò	C	IS SUBJECT TO SETOFF, SO STATE.	Ğ	ĭ	Ė	AMOUNT OF CLAIM
, ,	R			NGENT	D A T	D	
Account No. 321902702 (multiple accounts)			10/06 - 2/08	T	T		
	1		Medical	L	E D		
Lutheran General Hospital							
1775 Dempster		-					
Park Ridge, IL 60068							
[ge, cools							
							1,000.00
				L			1,000.00
Account No. 31989811			1/06 - 12/07				
	1		Medical				
Lutheran General Hospital							
1775 Dempster		-					
Park Ridge, IL 60068							
· ··································							
							303.00
				ot			000.00
Account No. 21621			Medical				
Maine-Ridge Medical Associates							
9301 West Golf Road		-					
Suite 302							
Des Plaines, IL 60016							
							72.00
Account No. 3-353-075-266-10	┢	\vdash	12/07	\vdash		┝	
Account No. 3-333-073-200-10	ł		Purchases				
Manakati Etabla			Fulcilases				
Marshall Fields							
PO Box 59231		-					
Minneapolis, MN 55459							
							59.00
Account No.	Г	T	10/07	\top		T	
	ł		Medical				
McClean County Anesthesiology	l	1					
2200 Fort Jesse Road #240	l	_					
Normal, IL 61761	l	1					
Normal, IL 01701		1				1	
		1				1	705.00
	L	L		L		L	795.00
Sheet no. 17 of 25 sheets attached to Schedule of				Subt	ota	1	
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	2,229.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Valerie S. Gangware		Case No	
•		Debtor		

		_			_	_	
CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	U	D	
MAILING ADDRESS	CODEBTO	н	DATE CLAIM WAS INCURRED AND	CONT	UZLLQUL	S	
INCLUDING ZIP CODE,	В	W	CONSIDERATION FOR CLAIM. IF CLAIM	1 1	Q	ΰ	
AND ACCOUNT NUMBER	O	C	IS SUBJECT TO SETOFF, SO STATE.	N G	U	E	AMOUNT OF CLAIM
(See instructions above.)	R	ľ	ŕ	NGEN	ט	D	
Account No.			10/07	Ť	A T E D		
	l		Medical		Ď		
McClean County Neurology SC							
2204 Eastland Drive		_					
Bloomington, IL 61704							
							365.00
							303.00
Account No. 324057017			12/07				
	1		Medical				
Medical Recovery Specialists							
2250 E. Devon Ave., #288		-					
Des Plaines, IL 60016							
							501.00
Account No. 5082147	H		2/08				
Ticcount (10. OUL 14)	ł		Medical				
Merchants and Medical							
6324 Taylor Drive		L					
Flint, MI 48507							
Filmt, Mil 40307							
							2,029.00
Account No. 861-1-0003385279			Medical				
Midwest Diagnostic Pathology,SC							
75 Remittance Drive Sutie 3070		-					
Chicago, IL 60675-3070							
							95.00
Account No. 2007 001780	H	H	6/07	H			
	ł		NOTICE ONLY				
Mike Maginity							
1371 N. Rosebud lane		_					
Addison, IL 60601							
Audison, IL 0000							
							0.00
Sheet no. <u>18</u> of <u>25</u> sheets attached to Schedule of				Subt			2,990.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	e)	2,330.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Valerie S. Gangware		Case No	
•		Debtor		

		_			_	_	
CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	S	U	P	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J M H	IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	UNLIQUIDATED	SPUTED	AMOUNT OF CLAIM
Account No.			NOTICE ONLY	Т	T E		
Nancy Nicol c/o The Sullivan Firm Ltd. 2550 W. Golf Road #101 Rolling Meadows, IL 60008		-			D		0.00
Account No. 11942			Medical				
Neurology Specialists Of Northern PO Box 2823 Carol Stream, IL 60132		-					82.00
	L						02.00
Account No. 5399778			Medical				
North Shore Radiological 9410 Compubill Drive Orland Park, IL 60462-6200		-					45.00
							45.00
Account No. North Suburban Gastroenterlogy 7447 W. Talcott Ave # 358 Chicago, IL		-	12/07 Medical				8,155.00
Account No. 2500-0128-0484	T		12/07				
Northshore Gas 2111 Jordan Terrace Waukegan, IL 60079		-	Services				843.00
Sheet no. 19 of 25 sheets attached to Schedule of				Subt	ota	1	0.405.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	e)	9,125.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Valerie S. Gangware		Case No.	
_		Debtor		

	1	1	ach and Mills I laint an Operanistic	16		Г	1	
CREDITOR'S NAME,	ŏ	Hu	sband, Wife, Joint, or Community	6	N	D		
MAILING ADDRESS	D	Н	DATE CLAIM WAS INCURRED AND	CONT	UNLI	S		
INCLUDING ZIP CODE,	B	w	CONSIDERATION FOR CLAIM. IF CLAIM	1	Q	Ü	١.,,	OVER OF START
AND ACCOUNT NUMBER	CODEBTOR	C	IS SUBJECT TO SETOFF, SO STATE.	G	II	I F	AM	OUNT OF CLAIM
(See instructions above.)	R	١	, '	N G E N T	D A T	D		
Account No. 47981859			12/07	ĪΫ	Ţ			
	1		Medical		E D			
Northwest Community Hospital							1	
c/o: Pellettieri & Associates, LTD		-						
P.O. Box 536								
Linden, MI 48451								
Linden, Wi 40431								500.00
								500.00
Account No. 47336279			12/06 - 12/07					
	1		Medical					
Northwest Community Hospital								
800 West Central Rd		-						
Arlington Heights, IL 60005								
l and the second								
								619.00
								019.00
Account No. 43750593			Medical					
	1							
Northwest Community Hospital								
c/o C.B. Accounts, Inc.		-						
1101 Main St.								
Peoria, IL 61606								
'								200.00
	-			-				
Account No. 3655576-214	Į.		Medical					
Northwest Community House								
Northwest Community Hospital								
Health Care Financial Services		-						
800 W. Central Road								
Arlington Heights, IL 60005								
								118.00
Account No. 25301	f	t	Medical	\vdash	H	H		
	1					1		
Northwest Metro Urology								
Slot 302152		-						
PO Box 66973	1	1				1		
Chicago, IL 60666	1	1				1		
omougo, in ooooo	1					1		400.00
						L		409.00
Sheet no. 20 of 25 sheets attached to Schedule of				Sub	ota	ıl		4 0 4 0 0 0
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)		1,846.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Valerie S. Gangware	Case	e No
_	_	Debtor ,	

Account No. Unknown			111.	shood Wife laint or Community	16	1	Г	
AND ACCOUNT NUMBER (See instructions above.) Account No. 8838735 Northwestern Memorial Hospital PO Box 73590 Chicago, IL 60673-7690 Account No. Unknown Oak Mill Imaging 7900 N. Milwaukee Ave #16A Niles, IL 60714 Optima American Express PO Box 36002 Fort Lauderdale, FL 33336 Account No. 15440119 PRA 141895 Park Ridge Anesthesiology 1755 Dempster Street Park Ridge, IL 60068 Park Ridge Anesthesiology 1755 Dempster Street Park Ridge, IL 60068 Sheet no. 21 of 25 sheets attached to Schedule of Schedule		ŏ	ı	spand, whe, John, or Community	ĕ	N	Ιį	
AND ACCOUNT NUMBER (See instructions above.) Account No. 8838735 Northwestern Memorial Hospital PO Box 73590 Chicago, IL 60673-7690 Account No. Unknown Oak Mill Imaging 7900 N. Milwaukee Ave #16A Niles, IL 60714 Optima American Express PO Box 36002 Fort Lauderdale, FL 33336 Account No. 15440119 PRA 141895 Park Ridge Anesthesiology 1755 Dempster Street Park Ridge, IL 60068 Park Ridge Anesthesiology 1755 Dempster Street Park Ridge, IL 60068 Sheet no. 21 of 25 sheets attached to Schedule of Schedule		E		DATE CLAIM WAS INCURRED AND	T	ŀ	P	
Account No. 88838735 Northwestern Memorial Hospital PO Box 73690 Account No. Unknown Oak Mill Imaging 7900 N. Milwaukse Ave #16A Niles, IL 60714 Optima American Express PO Box 36002 Fort Lauderdale, FL 33336 Park Ridge Anesthesiology 1755 Dempster Street Park Ridge, IL 60068 Sheet no. 21 of 25 sheets attached to Schedule of Northwestern Memorial Hospital 1/07-12/07 Medical 2,000.00 2,000.00 2,000.00 2,000.00 12/07 Purchases Medical 7,000.00 12/07 Purchases 7,000.00 1,400.00 Account No. Multiple Accounts Park Ridge Anesthesiology 1755 Dempster Street Park Ridge, IL 60068 1,330.00 Sheet no. 21 of 25 sheets attached to Schedule of		В				Q	Ų	AMOUNT OF CLAIM
Account No. 88838735 Northwestern Memorial Hospital PO Box 73690 Account No. Unknown Oak Mill Imaging 7900 N. Milwaukse Ave #16A Niles, IL 60714 Optima American Express PO Box 36002 Fort Lauderdale, FL 33336 Park Ridge Anesthesiology 1755 Dempster Street Park Ridge, IL 60068 Sheet no. 21 of 25 sheets attached to Schedule of Northwestern Memorial Hospital 1/07-12/07 Medical 2,000.00 2,000.00 2,000.00 2,000.00 12/07 Purchases Nedical 1/07-12/07 Medical 1/07-12/07 Medical 1/07-12/07 Medical 1/07-12/07 Medical 1/07-12/07 Medical 1/07-12/07 Medical 1/08 Medical 1/07-12/07 Medical 1/07-12/07 Medical 1/07-12/07 Medical 1/07-12/07 Medical 1/07-12/07 Medical 1/08 Medical 1/08 Medical 1/07-12/07 Medical 1/08 Medical 1/07-12/07 Medical 1/07-12/08 Medical 1/08 Medical		Ö		IS SUBJECT TO SETOFF, SO STATE.	Ğ	Ĭ	Ė	AMOUNT OF CLAIM
Northwestern Memorial Hospital PO Box 73690 Chicago, IL 60673-7690 Chicago, IL 60714	(See instructions above.)	R	Ĺ		N	D A	l d	
Northwestern Memorial Hospital PO Box 73690 Account No. Unknown Oak Mill Imaging 7900 N. Milwaukee Ave #16A Niles, IL 60714 Account No. 3730-202795-91009 Optima American Express PO Box 36002 Fort Lauderdale, FL 33336 Park Ridge Anesthesiology 1755 Dempster Street Park Ridge, IL 60068 Account No. Multiple Accounts Account No. Multipl	Account No. 88838735			1/07 -12/07	T	ΙT		
PO Box 73690 Chicago, IL 60673-7690		1		Medical		D		
PO Box 73690 Chicago, IL 60673-7690	Northwestern Memorial Hospital							
Chicago, IL 60673-7690	II = = = = = = = = = = = = = = = = = =		-					
Account No. Unknown								
Account No. Unknown								
Account No. Unknown								2 000 00
Medical Medi								2,000.00
Dak Mill Imaging 7900 N. Milwaukse Ave #16A Niles, IL 60714	Account No. Unknown			2/14/08			Г	
Topon N. Milwaukee Ave #16A Niles, IL 60714		1		Medical				
Topon N. Milwaukee Ave #16A Niles, IL 60714	Oak Mill Imaging							
Niles, IL 60714 Account No. 3730-202795-91009			-					
Account No. 3730-202795-91009								
Account No. 3730-202795-91009	141103, 12 007 14							
Account No. 3730-202795-91009								400.00
Optima American Express PO Box 36002 Fort Lauderdale, FL 33336 Account No. 15440119 PRA 141895 Park Ridge Anesthesiology 1755 Dempster Street Park Ridge, IL 60068 Account No. Multiple Accounts Park Ridge Anesthesiology 1755 Dempster Street Park Ridge Anesthesiology 1755 Dempster Street Park Ridge, IL 60068 8/07-1/08 Medical 1,400.00 Account No. Multiple Accounts Park Ridge Anesthesiology 1755 Dempster Street Park Ridge, IL 60068 1,330.00								100.00
Optima American Express PO Box 36002 Fort Lauderdale, FL 33336 Account No. 15440119 PRA 141895 Park Ridge Anesthesiology 1755 Dempster Street Park Ridge, IL 60068 Account No. Multiple Accounts Park Ridge Anesthesiology 1755 Dempster Street Park Ridge Anesthesiology 1755 Dempster Street Park Ridge, IL 60068 8/07-1/08 Medical 1,400.00 Account No. Multiple Accounts Park Ridge Anesthesiology 1755 Dempster Street Park Ridge, IL 60068 1,330.00	Account No. 3730-202795-91009			12/07				
Optima American Express PO Box 36002 Fort Lauderdale, FL 33336 Account No. 15440119 PRA 141895 Park Ridge Anesthesiology 1755 Dempster Street Park Ridge, IL 60068 Account No. Multiple Accounts Park Ridge Anesthesiology 1755 Dempster Street Park Ridge Anesthesiology 1755 Dempster Street Park Ridge Anesthesiology 1755 Dempster Street Park Ridge, IL 60068 Sheet no. 21 of 25 sheets attached to Schedule of		1						
PO Box 36002 Fort Lauderdale, FL 33336 -	Ontima American Evnress							
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Account No. 15440119 PRA 141895 Park Ridge Anesthesiology 1755 Dempster Street Park Ridge, IL 60068 Account No. Multiple Accounts Park Ridge Anesthesiology 1755 Dempster Street Park Ridge, IL 60068 B/07-1/08 Medical 1,400.00 1,330.00 Sheet no. 21 of 25 sheets attached to Schedule of	Fort Lauderdale, FL 33330							
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1755 Dempster Street Park Ridge, IL 60068 Account No. Multiple Accounts Park Ridge Anesthesiology 1755 Dempster Street Park Ridge, IL 60068 Sheet no. 21 of 25 sheets attached to Schedule of Subtotal	Account No. 15440119 PRA 141895			Medical				
1755 Dempster Street Park Ridge, IL 60068 Account No. Multiple Accounts Park Ridge Anesthesiology 1755 Dempster Street Park Ridge, IL 60068 Sheet no. 21 of 25 sheets attached to Schedule of Subtotal		1						
1755 Dempster Street Park Ridge, IL 60068 Account No. Multiple Accounts Park Ridge Anesthesiology 1755 Dempster Street Park Ridge, IL 60068 Sheet no. 21 of 25 sheets attached to Schedule of Subtotal	Park Ridge Anesthesiology							
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Account No. Multiple Accounts Park Ridge Anesthesiology 1755 Dempster Street Park Ridge, IL 60068 Sheet no. 21 of 25 sheets attached to Schedule of								
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Park Ridge Anesthesiology 1755 Dempster Street Park Ridge, IL 60068 Sheet no. 21 of 25 sheets attached to Schedule of		L	L					1,400.00
Park Ridge Anesthesiology 1755 Dempster Street Park Ridge, IL 60068 Sheet no. 21 of 25 sheets attached to Schedule of	Account No. Multiple Accounts		1			_		
1755 Dempster Street Park Ridge, IL 60068 1,330.00 Sheet no. 21 of 25 sheets attached to Schedule of Subtotal		1		Medical				
1755 Dempster Street Park Ridge, IL 60068 1,330.00 Sheet no. 21 of 25 sheets attached to Schedule of Subtotal	Park Ridge Anesthesiology	1	1					
Park Ridge, IL 60068 1,330.00 Sheet no. 21 of 25 sheets attached to Schedule of Subtotal		1	-					
Sheet no. 21 of 25 sheets attached to Schedule of Subtotal		1	1					
Sheet no. 21 of 25 sheets attached to Schedule of Subtotal		1						
Sheet no. 21 of 25 sheets attached to Schedule of Subtotal		l						1 220 00
Sheet no. 21 of 25 sheets attached to Schedule of Subtotal								1,330.00
	Sheet no. 21 of 25 sheets attached to Schedule of		_		Sub	tota	ıl	44.00
Creditors Holding Unsecured Nonpriority Claims (Total of this page)	Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	11,830.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Valerie S. Gangware	Case	e No
_	_	Debtor ,	

					_		
CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	S	U	P	
MAILING ADDRESS	CODEBTO	н	DATE CLAIM WAS INCUIDED AND	CONT	UNLLQUL	s	
INCLUDING ZIP CODE,	B	W	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	11	Q	Įυ	
AND ACCOUNT NUMBER	O	C	IS SUBJECT TO SETOFF, SO STATE.	N G	ľ	ΙE	AMOUNT OF CLAIM
(See instructions above.)	R	١	, ,	NGEN	טו	D	
Account No. 15440119			8/07 - 12/07	Ť	A T E D		
	1		Medical		Б		
Parkside Anesthesiology							
PO Box 1123		 -					
Jackson, MI 49204-1123							
000K3011, IIII 43204 1 123							
							1 220 00
							1,330.00
Account No.			NOTICE ONLY				
	1						
Paul Idlass							
1091 N. Corporate Circle #K		-					
Grayslake, IL 60030							
							0.00
Account No. 3419650	-		Medical	┢			
Account No. 3419650	ł		Medical				
Ballattiani O Associates							
Pellettieri & Associates							
991 Oak Creek Dr.		-					
Lombard, IL 60148-6408							
							117.00
Account No. 3875301			Medical				
	1						
Pellettieri & Associates							
991 Oak Creek Dr.		-					
Lombard, IL 60148-6408							
							500.00
A N- 44050	╂	-	7/07 40/07	\vdash			
Account No. 11059	1		7/07-12/07 Medical				
	l		wedical				
Primary Care Medical Specialists	l						
960 Rand Rd. Suite 205	l	-					
Des Plaines, IL 60016	1						
	l						
							790.00
Sheet no. 22 of 25 sheets attached to Schedule of	_			Subt	ota	1	
Creditors Holding Unsecured Nonpriority Claims			(Total of t				2,737.00
Creations froming offsecured Nonphority Claims			(10101011	ш8	pag	,0)	

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B6F (Official Form 6F) (12/07) - Cont.

In re	Valerie S. Gangware	Case	e No
_	_	Debtor ,	

	<u>ا</u>	ш	isband, Wife, Joint, or Community		Lu	Ь	,
CREDITOR'S NAME,	CODEBTOR		issand, whe, som, or community	CONT	Ň	D I S P	
MAILING ADDRESS INCLUDING ZIP CODE,	Ę	H W	DATE CLAIM WAS INCURRED AND	Ť	١	P	
AND ACCOUNT NUMBER	Ī	J	CONSIDERATION FOR CLAIM. IF CLAIM	Ņ	Ü	U T E	AMOUNT OF CLAIM
(See instructions above.)	R R	С	IS SUBJECT TO SETOFF, SO STATE.	N G E N T	Ď	E	
Account No.	t	t	NOTICE ONLY	T	A T F	Ď	
	1				E D		_
Robert Kohn							
8650 West 165th Place		-					
Orland Park, IL 60462							
		L			L		0.00
Account No.			12/07				
			Services				
Roger A. White and Associates, LTD							
21 N. Skokie Hwy #201 Lake Bluff, IL 60044		ľ					
Lake Bluff, iL 60044							
							10,000.00
Account No. 21166780	╁	H	3/06 - 12/07		╁		
Treedunt No. 21100100	ł		Medical				
Rush North Shore Medical Center							
c/o: Revenue Production Management		-					
2800 S. River Road Suite 450							
Des Plaines, IL 60018							
							127.00
Account No. 20242863	t		3/05 - 12/07		T		
	1		Medical				
Rush North Shore Medical Center							
9600 Gross Point Road		-					
Skokie, IL 60076							
							388.00
Account No. 22203376			3/07 -12/07				
			Medical			1	
Rush North Shore Medical Center							
9600 Gross Point Road		-					
Skokie, IL 60076						1	
							130.00
							130.00
Sheet no. 23 of 25 sheets attached to Schedule of				Sub			10,645.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	10,040.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Valerie S. Gangware	Case	e No
_	_	Debtor ,	

	1.	1		T_	1	_	1
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER	CODEBTO	Hu H W J	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	CONTIN	UNLLGUL	DISPUTE	AMOUNT OF CLAIM
(See instructions above.)	O R	С	IS SUBJECT TO SETOFF, SO STATE.	N G E N	I D A	E D	ANNOUNT OF CEANN
Account No. CR-proalliance			NOTICE ONLY	٦	D A T E D		
Stahelin Parters 800 Roosevelt Road		-					
Building A, Suite 120 Glen Ellyn, IL 60137							
,,							0.00
Account No. 2056			Medical				
Suburban Ear Noe & Throat Speciali							
8780 Golf Road Suite 200		-					
Niles, IL 60714							
							293.00
Account No. Valerie and/or Brand Gangware			2/08 Religious Dues				
Temple Chai			Religious Dues				
1670 RFD Long Grove, IL 60049		-					
Long Grove, ic 60049							
							3,000.00
Account No.			Personal Loan				
UC Funding							
Ivan Baker 146 2nd Street, Ste 200		-					
Saint Petersburg, FL 33701							
							100.00
Account No.			2/05 - 5/07 Student Loans				
US Department of Education			otadem Edans				
PO Box 7202 Utica, NY 13504-7202		-					
01104, 141 13304-7202							
							40,449.00
Sheet no. 24 of 25 sheets attached to Schedule of				Sub			43,842.00
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	e)	10,012.00

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 $B6F\ (Official\ Form\ 6F)\ (12/07)$ - Cont.

In re	Valerie S. Gangware		Case No	
•		Debtor		

				_			
CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	S	U	P	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	I S P U T E D	AMOUNT OF CLAIM
Account No. 338526514			12/07	Т	T		
US Department of Education P.O. Box 530260 Atlanta, GA 30353		-	Student Loans		D		43,744.00
Account No.	╁	┢	8/05-5/07	+	+	╁	
recount ito.	1		Student Loan				
US Department of Education PO Box 7202 Utica, NY 13504-7202		-					
							14,350.00
Account No.			Services				
Wheeling Plumbing 600 Northgate Parkway Unit L Wheeling, IL 60090		-					
							439.00
Account No. 6195			Medical				
Women's Health Specialites 1875 Dempster Suite 245 Park Ridge, IL 60068		-					
gc , cocc							432.00
Account No.							
					L		
Sheet no. _25 _ of _25 _ sheets attached to Schedule of				Sub			58,965.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	
					Γota		419,315.00
			(Report on Summary of So	che	dule	es)	+19,515.00

Advanced Radiology Consultants 520 E. 22nd St. Lombard, IL 60148

Advanced Radiology Consultants 1420 Renaissance Drive Park Ridge, IL 60068

Advocate c/o Malcomb S. Gerald & Associates 332 S. Michigan Chicago, IL 60604

Advocate Health Care PO Box 73208 Chicago, IL 60673

Advocate Lutheran General Hospital 1675 W. Dempster Park Ridge, IL 60068

Advocate Lutheran General Hospital 1775 Dempster Street Park Ridge, IL 60068

Advocate Medical Group 701 Lee St. Des Plaines, IL 60016

Alexian Brothers 806 Biesterfeld Rd. Elk Grove Village, IL 60007

American Express PO Box 981537 El Paso, TX 79998

American Express Optima PO BOx 650448 Dallas, TX 75265

American General Finance 463 N. Lake St. Mundelein, IL 60060-0604

American National Bank & Trst 628 Main Street Danville, VA 24541

Amoco PO Box 9014 Des Moines, IA 50368-9014

ATG Credit, LLC PO Box 14895 Chicago, IL 60614

Bank One 150 E. Campusview Worthington, OH 43235

Bergman Orthodics 1860 John's Drive Glenview, IL 60025

Bill Welnhofer 227 West Monroe Street Suite 2100 Chicago, IL 60606

Blockbuster c/o Credit Protection Assoc., L.P. 13355 Noel Rd. Dallas, TX 75240

Bloomington Radiology PO Box 3668 Bloomington, IL 61702

Bob R. Krohn 8650 West 165 Place Orland Park, IL 60462

BPM Amoco Processing Center Des Moines, IA 50360

Brian Schwartz 807 Christophers Street Plano, IL 60545 Bromenn Regional Medical Center 1304 Franklin Ave.
Normal, IL 61761

Carle Clinic Assoc. P.O. Box 6002 Urbana, IL 61803

Centre for Women's Health 21279 Network Place Chicago, IL 60673

Certified Services PO Box 177 Waukegan, IL 60079

Certified Services Inc PO Box 177 Waukegan, IL 60079

Chase 201 N. Walnut St. MAILSTOP DE1-1027 Wilmington, DE 19801

Chase N54 W 13600 Woodale Drive Menomonee Falls, WI 53051

Chase Bank 131 S. Dearborn Fifth Floor Chicago, IL 60603

Chase BP 225 Chastain Meadows Court Kennesaw, GA 30144

Citi Bank c/o: National Enterprise Systems 29125 Solon Rd Solon, OH 44139

Citi Cards PO Box 6409 The Lakes, NV 88901-6409 Citibank c/o The CBE Group 131 Tower Park, Suite 100 Waterloo, IA 50704

Computer Credit, Inc. 640 West Fourth Street PO Box 5238 Winston Salem, NC 27113-5238

Condell Acute Care Centers c/o Computer Credit, Inc. 36866 Eagle Way Chicago, IL 60678

Credit Management Services 9525 Sweet Valley Drive Valley View, OH 44125

David Chow, Chiropractic 1804 N. Arlington Hts Road Arlington Heights, IL 60004

David Sanes 9451 Lockwood Ave Skokie, IL 60076

David Sanes 9451 N Lockwood Skokie, IL 60077

Discover Card PO Box 15316 Wilmington, DE 19850-5316

Discover Card PO Box 30395 Salt Lake City, UT 84130

Discover Card PO Box 3008 New Albany, OH 43054 Dorothy Sanders 15934 Woodlawn South Holland, IL 60473

Doug Jones 25050 Indian Trail Barrington, IL 60010

Doug Wakley 35 S. Barrington Road Barrington, IL 60010

Dr. James Chorzempa 1425 McHenry Road Suite 101 Buffalo Grove, IL 60089

Dr. Mark Brandt 7900 N. Milwaukee Niles, IL 60714

Edgar Brand Gangware III 1726 Johnson Drive #223

Elk Grove Radiology 75 Remittance Dr., Ste. 6500 Chicago, IL 60675

ENH Medical Group P.O. Box 73208 Chicago, IL 60673

Evanston Northwestern Medical Group PO Box 73208 Chicago, IL 60673

Exxon Mobil PO Box 530962 Atlanta, GA 30353-0962

First USA 201 N. Walnut St. 3 Christina Center (WACH-FDR) Wilmington, DE 19801 FMCC 12110 Emmet Omaha, NE 68164

Ford Credit PO Box 790093 Saint Louis, MO 63179-0093

Frank Gangware 355 N. Delaplaine Road Riverside, IL 60546

GEMB/JCP P.O. Box 981402 El Paso, TX 79998

GM Card PO Box 37281 Baltimore, MD 21297

GMAC
Payment Processing Center
PO Box 9001951
Louisville, KY 40290-1951

Golf-Western Surgical Specialists 8901 Golf Road Suite 305 Des Plaines, IL 60016

Harris Bankcard Services PO Box 15288 Wilmington, DE 19886-5288

Hochstadter & Isaacson Oral & Maxil 600 West Lake Cook Road Suite 101 Buffalo Grove, IL 60089

HSBC NV P.O. Box 19360 Portland, OR 97280 ICS Collection Service PO Box 646 Oak Lawn, IL 60454-0646

IL Bone & Joint Institute 135 S. LaSalle, Dept. 1052 Chicago, IL 60674-1052

Internal Revenue Service Centralized Insolvency Operations P.O. Box 21126 Philadelphia, PA 19114

Ivan Baker
c/o UC Funding
146 2nd Street, Ste 200
Saint Petersburg, FL 33701

John Erwin 274 Ashland Court Buffalo Grove, IL 60089

Joseph Meis 100 Village Green #120 Lincolnshire, IL 60069

Kiran Patil 24115 Newcatle Street Plainfield, IL 60585

Kohl's PO Box 2983 Milwaukee, WI 53201-2983

Kohl's Department Store c/o: Merchants & Med. Credit Corp. 6324 Taylor Dr. Flint, MI 48507

Kohl/Chase
N56 W17000 Ridgewood Dr.
Menomonee Falls, WI 53051

Kur's Landscaping
1516 N. Elmhurst Road
Suite 130
Mount Prospect, IL 60056

LaSalle Bank 135 S. LaSalle Chicago, IL 60602-4105

LaSalle Bank 135 S. LaSalle St. Chicago, IL 60603

Lutheran General Hospital 1775 Dempster Park Ridge, IL 60068

Maine-Ridge Medical Associates 9301 West Golf Road Suite 302 Des Plaines, IL 60016

Marshall Fields PO Box 59231 Minneapolis, MN 55459

McClean County Anesthesiology 2200 Fort Jesse Road #240 Normal, IL 61761

McClean County Neurology SC 2204 Eastland Drive Bloomington, IL 61704

Medical Recovery Specialists 2250 E. Devon Ave., #288 Des Plaines, IL 60016

Merchants and Medical 6324 Taylor Drive Flint, MI 48507

Midwest Diagnostic Pathology, SC 75 Remittance Drive Sutie 3070 Chicago, IL 60675-3070

Mike Maginity 1371 N. Rosebud lane Addison, IL 60601

Nancy Nicol c/o The Sullivan Firm Ltd. 2550 W. Golf Road #101 Rolling Meadows, IL 60008

Neurology Specialists Of Northern PO Box 2823 Carol Stream, IL 60132

North Shore Radiological 9410 Compubill Drive Orland Park, IL 60462-6200

North Suburban Gastroenterlogy 7447 W. Talcott Ave # 358 Chicago, IL

Northshore Gas 2111 Jordan Terrace Waukegan, IL 60079

Northshore Gas 300 Grand Ave Waukegan, IL 60085

Northwest Cardio-Vascular Assoc. 880 W. Central Rd., #7100 Arlington Heights, IL 60005

Northwest Community Hospital c/o: Pellettieri & Associates, LTD P.O. Box 536 Linden, MI 48451

Northwest Community Hospital 800 West Central Rd Arlington Heights, IL 60005 Northwest Community Hospital c/o C.B. Accounts, Inc. 1101 Main St. Peoria, IL 61606

Northwest Community Hospital Health Care Financial Services 800 W. Central Road Arlington Heights, IL 60005

Northwest Community Hospital c/o BC Accounts, Inc. 1101 Main St Peoria, IL 61606

Northwest Metro Urology Slot 302152 PO Box 66973 Chicago, IL 60666

Northwestern Memorial Hospital PO Box 73690 Chicago, IL 60673-7690

Northwestern Memorial Hospital 251 E. Huron St. Chicago, IL 60611-2908

Oak Mill Imaging 7900 N. Milwaukee Ave #16A Niles, IL 60714

Optima American Express PO Box 36002 Fort Lauderdale, FL 33336

Optima American Express c/o Bekett & Lee Law Firm

Optima American Express c/o Becket & Lee Po Box 3001 Malvern, PA 19355 Park Ridge Anesthesiology 1755 Dempster Street Park Ridge, IL 60068

Park Ridge Anesthesiology PO Box 1123 Jackson, MI 49204-1123

Parkside Anesthesiology PO Box 1123 Jackson, MI 49204-1123

Paul Idlass 1091 N. Corporate Circle #K Grayslake, IL 60030

Pellettieri & Associates 991 Oak Creek Dr. Lombard, IL 60148-6408

Pellettieri & Associates PO Box 536 Linden, MI 48451

Primary Care Medical Specialists 960 Rand Rd. Suite 205 Des Plaines, IL 60016

Revenue Production Management PO Box 925 Des Plaines, IL 60018

Robert Kohn 8650 West 165th Place Orland Park, IL 60462

Roger A. White and Associates, LTD 21 N. Skokie Hwy #201 Lake Bluff, IL 60044

Rush North Shore Medical Center c/o: Revenue Production Management 2800 S. River Road Suite 450 Des Plaines, IL 60018

Rush North Shore Medical Center 9600 Gross Point Road Skokie, IL 60076

Rush North Shore Medical Center PO Box 97805 Chicago, IL 60678

Stahelin Parters 800 Roosevelt Road Building A, Suite 120 Glen Ellyn, IL 60137

Star Nissan 5757 West Touhy Niles, IL 60714

Suburban Ear Noe & Throat Speciali 8780 Golf Road Suite 200 Niles, IL 60714

Temple Chai 1670 RFD Long Grove, IL 60049

Tianne Kurn 18400 Fox Run Drive Elk Grove Village, IL 60007

UC Funding Ivan Baker 146 2nd Street, Ste 200 Saint Petersburg, FL 33701

US Department of Education PO Box 7202 Utica, NY 13504-7202

US Department of Education P.O. Box 530260 Atlanta, GA 30353

Wheeling Plumbing 600 Northgate Parkway Unit L Wheeling, IL 60090

Women's Health Specialites 1875 Dempster Suite 245 Park Ridge, IL 60068 Case 08-04222 Doc 1 Filed 02/25/08 Entered 02/25/08 14:30:27 Desc Main Document Page 56 of 75

B6G (Official Form 6G) (12/07)

In re	Valerie S. Gangware	Case N	Vo
-		Debtor ,	

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case 08-04222 Doc 1 Filed 02/25/08 Entered 02/25/08 14:30:27 Desc Main Document Page 57 of 75

B6H (Official Form 6H) (12/07)

In re	Valerie S. Gangware		Case No.	
		Debtor		

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

David Sanes
9451 N Lockwood
Skokie, IL 60077

NAME AND ADDRESS OF CREDITOR

Star Nissan
9757 West Touhy
Niles, IL 60714

B6I (Official Form 6I) (12/07)

In re	Valerie S. Gangware		Case No.	
		Debtor(s)		

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Stati	is: DEPENDENTS C	OF DEBTOR AND SPOUSE		
Separated	RELATIONSHIP(S): Son	AGE(S): 17		
Employment:*	DEBTOR	SPOUS	E	
Occupation	Teacher			
Name of Employer	Jewish Council for Youth Services			
How long employed	4 years			
Address of Employer	1700 Weiland Buffalo Grove, IL 60089			
*See Attachment for	· Additional Employment Information			
	of average or projected monthly income at time case filed) ges, salary, and commissions (Prorate if not paid monthly) overtime	DEBTOR \$ 2,922.0 \$ 0.0		SPOUSE N/A N/A
3. SUBTOTAL		\$\$	<u>0</u> \$_	N/A
 4. LESS PAYROLL a. Payroll taxes b. Insurance c. Union dues d. Other (Specif 	and social security	\$ 462.0 \$ 308.0 \$ 0.0 \$ 0.0	0 0 \$	N/A N/A N/A N/A
(ar. (ar		\$ 0.0		N/A
5. SUBTOTAL OF P	AYROLL DEDUCTIONS	\$	<u>0</u> \$_	N/A
6. TOTAL NET MO	NTHLY TAKE HOME PAY	\$	<u>0</u> \$_	N/A
8. Income from real p 9. Interest and divide	1 5	\$ 0.0 \$ 0.0	<u>o</u> \$ _	N/A N/A N/A
dependents liste		\$ 0.0 \$ 0.0 \$ 0.0	<u> </u>	N/A N/A N/A
		\$ 0.0 \$ 0.0 \$ 1,552.0 \$ 850.0	0 \$ <u> </u>	N/A N/A N/A
14. SUBTOTAL OF	LINES 7 THROUGH 13	\$\$	<u>0</u> \$_	N/A
15. AVERAGE MON	NTHLY INCOME (Add amounts shown on lines 6 and 14)	\$\$	<u>0</u> \$_	N/A
16. COMBINED AV	ERAGE MONTHLY INCOME: (Combine column totals from line	15) \$	4,554	4.00

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

(Case 08-04222	Doc 1		Entered 02/25/ Page 59 of 75	/08 14:30:27	Desc Main	2/25/08 2:40F
B6I (Official Fo	orm 6I) (12/07)		2 ocament	. ago co c c			
In re Vale	erie S. Gangware				Case No.		

Debtor(s)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S) Attachment for Additional Employment Information

Debtor		
Occupation	Teacher	
Name of Employer	Temple Chai	
How long employed	24 Years	
Address of Employer	1670 RFD (Checker Rd)	
• •	Lake Zurich, IL 60047	

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B6J (Official Form 6J) (12/07)

In re	Valerie S. Gangware	S. Gangware		
		Debtor(s)		

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case

filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22		e monthly
☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Comple expenditures labeled "Spouse."	ete a separate	e schedule of
1. Rent or home mortgage payment (include lot rented for mobile home)	\$	1,350.00
a. Are real estate taxes included? Yes No _X_		·
b. Is property insurance included? Yes No _X		
2. Utilities: a. Electricity and heating fuel	\$	400.00
b. Water and sewer	\$	0.00
c. Telephone	\$	75.00
d. Other See Detailed Expense Attachment	\$	280.00
3. Home maintenance (repairs and upkeep)	\$	0.00
4. Food	\$	475.00
5. Clothing	\$	150.00
6. Laundry and dry cleaning	\$	125.00
7. Medical and dental expenses	\$	200.00
8. Transportation (not including car payments)	\$	350.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	150.00
10. Charitable contributions	\$	16.00
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	0.00
b. Life	\$	0.00
c. Health	\$	0.00
d. Auto	\$	75.00
e. Other 12. Taxes (not deducted from wages or included in home mortgage payments)	\$	0.00
(Specify)	\$	0.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)		
a. Auto	\$	285.00
b. Other	\$	0.00
c. Other	\$	0.00
14. Alimony, maintenance, and support paid to others	\$	200.00
15. Payments for support of additional dependents not living at your home	\$	0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	0.00
17. Other See Detailed Expense Attachment	\$	425.00
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and,	\$	4,556.00
if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:		
20. STATEMENT OF MONTHLY NET INCOME	-	
a. Average monthly income from Line 15 of Schedule I	\$	4,554.00
b. Average monthly expenses from Line 18 above	\$	4,556.00
c. Monthly net income (a. minus b.)	\$	-2.00

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B6J (Official Form 6J) (12/07)

Document

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Case No.

In re Valerie S. Gangware

Debtor(s)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Detailed Expense Attachment

Other Utility Expenditures:

Cell Phone	 130.00
Cable T.V.	\$ 75.00
Internet Access	 75.00
Total Other Utility Expenditures	\$ 280.00

Other Expenditures:

Personal Grooming	\$ 125.00
Car Maintenance	\$ 75.00
Home Maintenance	\$ 125.00
Extra Curricular	\$ 100.00
Total Other Expenditures	\$ 425.00

Case 08-04222 Doc 1

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B6 Declaration (Official Form 6 - Declaration). (12/07)

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United States Bankruptcy Court Northern District of Illinois

In re	Valerie S. Gangware		Case No.	
		Debtor(s)	Chapter	7
	DECLARATION CONC	ERNING DEBTO	OR'S SCHEDUL	ES
	DECLARATION UNDER PENAL	TY OF PERJURY B	Y INDIVIDUAL DE	BTOR
	I declare under penalty of perjury that I ha 43 sheets, and that they are true and correct to			
Date	February 25, 2008 Signa	ture /s/ Valerie S. 0	Gangware	
		Valerie S. Gar	ngware	

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Debtor

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Desc Main

B7 (Official Form 7) (12/07)

United States Bankruptcy Court Nouthour District of Illinois

Not the in District of Tillions					
In re	Valerie S. Gangware		Case No.		
		Debtor(s)	Chapter	7	

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Ouestions 19 - 25. If the answer to an applicable question is "None," mark the box labeled "None," If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

> AMOUNT SOURCE

2008 Employment \$4,527.00 \$50,000.00 2007 Employment \$50,000.00 2006 Employment Document

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2

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

Individual or joint debtor(s) with primarily consumer debts. List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS DATES OF AMOUNT STILL OF CREDITOR **PAYMENTS** AMOUNT PAID **OWING**

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT DATES OF PAID OR PAYMENTS/ VALUE OF AMOUNT STILL NAME AND ADDRESS OF CREDITOR **TRANSFERS TRANSFERS OWING**

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

AMOUNT STILL

DATE OF PAYMENT

AMOUNT PAID

OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER Chase Bank

NATURE OF PROCEEDING

Judgment

COURT OR AGENCY AND LOCATION

STATUS OR DISPOSITION **Pending**

Valerie S. Gangware

2007-M1-103325

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF **PROPERTY**

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5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER **FMCC** 12110 Emmet Omaha, NE 68164

DATE OF REPOSSESSION. FORECLOSURE SALE. TRANSFER OR RETURN

DESCRIPTION AND VALUE OF **PROPERTY** 2003 Ford Winstar

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF

NAME AND ADDRESS OF ASSIGNEE

ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN

NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER

DESCRIPTION AND VALUE OF

3

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

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9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE David M. Siegel & Associates 790 Chaddick Drive Wheeling, IL 60090

DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR 12/17/07

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY \$1,301.00

4

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR **Bonafide Purchaser**

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

9/07

11/1/07

Time Share: Marriot Grand Vista Resort. Proceeds recieved: \$15,000. Proceeds went towards paving tuition, doctor's bills, hospital bills, car & medical insurance and Divorce

Lawyer.

Bonafide Purchaser 2111 Jordan Terrace Buffalo Grove, IL 60089

Short Sale: \$545,000. Amount owed \$560,000. Debtor recieved no proceeds from sale.

None

None

None b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE

DATE(S) OF TRANSFER(S)

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

11. Closed financial accounts

None

Unknown

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION Chase Bank

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER. AND AMOUNT OF FINAL BALANCE **Savings Account**

AMOUNT AND DATE OF SALE OR CLOSING Unknown \$100.00

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12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS DATE OF TRANSFER OR SURRENDER, IF ANY

5

13. Setoffs

None List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the

commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

DESCRIPTION AND VALUE OF **PROPERTY**

LOCATION OF PROPERTY

NAME AND ADDRESS OF OWNER

15. Prior address of debtor

None

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS 2111 Jordan Terrace **Buffalo Grove. IL 60089** NAME USED SAME

DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

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None a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

ENVIRONMENTAL NAME AND ADDRESS OF DATE OF SITE NAME AND ADDRESS NOTICE **GOVERNMENTAL UNIT** LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

ENVIRONMENTAL NAME AND ADDRESS OF DATE OF NOTICE

SITE NAME AND ADDRESS GOVERNMENTAL UNIT LAW

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

6

18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six **years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six **years** immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

BEGINNING AND NATURE OF BUSINESS **ENDING DATES**

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

NAME **ADDRESS**

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	February 25, 2008	Signature	/s/ Valerie S. Gangware	
			Valerie S. Gangware	
			Debtor	

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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Form 8 (10/05)

United States Bankruptcy Court Northern District of Illinois

		1 (of the fit Di	strict or minions					
In re	Valerie S. Gangware			Case N				
			Debtor(s)	Chapte	7			
	CHAPTER 7 INI	DIVIDUAL DEBTO	OR'S STATEME	NT OF I	NTENTION			
	I have filed a schedule of assets and lia	bilities which includes debt	s secured by property of	of the estate.				
	I have filed a schedule of executory cor	ntracts and unexpired leases	s which includes person	al property su	bject to an unexpire	ed lease.		
	I intend to do the following with respec	et to property of the estate v	to property of the estate which secures those debts or is subject to a lease:					
Descri	ption of Secured Property	Creditor's Name	Property will be Surrendered	Property is claimed as exempt	Property will be redeemed pursuant to 11 U.S.C. § 722	Debt will be reaffirmed pursuant to 11 U.S.C. § 524(c)		
2008	Nissan Versa Nissan	Star Nissan				X		
Descri Proper	•	Lessor's Name	Lease will be assumed pursuar to 11 U.S.C. § 362(h)(1)(A)	nt				
Date	February 25, 2008	Signature	/s/ Valerie S. Gangv Valerie S. Gangwar Debtor					

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United States Bankruptcy Court
Northern District of Illinois

In r	Valerie S. Gangware			Case No.	
			Debtor(s)	Chapter	7
	DISCLOSURE	OF COMPENSAT	TION OF ATTOR	NEY FOR DI	EBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) as compensation paid to me within one be rendered on behalf of the debtor(s	year before the filing of the	he petition in bankruptcy	, or agreed to be pa	id to me, for services rendered or to
	For legal services, I have agreed	to accept		\$	1,301.00
	Prior to the filing of this stateme	nt I have received		\$	1,301.00
	Balance Due			\$	0.00
2.	The source of the compensation paid	to me was:			
	Debtor		Other (specify):		
3.	The source of compensation to be pair	d to me is:			
	Debtor		Other (specify):		
 4. 5. 	firm. I have agreed to share the above A copy of the agreement, togethe In return for the above-disclosed fee, a. Analysis of the debtor's financial b. Preparation and filing of any petit c. Representation of the debtor at the d. [Other provisions as needed] Negotiations with secur	ove-disclosed compensation with a list of the names of I have agreed to render lesituation, and rendering action, schedules, statement of meeting of creditors and ed creditors to reduce as and applications as	on with a person or person of the people sharing in the gal service for all aspects lyice to the debtor in deteor affairs and plan which confirmation hearing, and to market value; exemple to meeded; preparation	of the bankruptcy ormining whether to may be required; d any adjourned hearmption planning	ase, including: file a petition in bankruptcy;
6.	By agreement with the debtor(s), the Representation of the d any other adversary pro	ebtors in any discharg			es, relief from stay actions or
		CEF	RTIFICATION		
this	I certify that the foregoing is a comploankruptcy proceeding.	ete statement of any agree	ment or arrangement for J	payment to me for r	epresentation of the debtor(s) in
Date	d: February 25, 2008		/s/ David M. Siege	ıl	
			David M. Siegel David M. Siegel & 790 Chaddick Driv Wheeling, IL 6009 (847) 520-8100	Associates ve	

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

- 1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.
- 3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

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Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

Certificate of Attorney

I hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

David M. Siegel	X /s/ David M. Siegel	February 25, 2008
Printed Name of Attorney	Signature of Attorney	Date
Address:		
790 Chaddick Drive Wheeling, IL 60090		
(847) 520-8100		
Certificate I (We), the debtor(s), affirm that I (we) have received and	e of Debtor read this notice.	
Valerie S. Gangware	X /s/ Valerie S. Gangware	February 25, 2008
Printed Name(s) of Debtor(s)	Signature of Debtor	Date
Case No. (if known)	X	
	Signature of Joint Debtor (if any)	Date

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STATEMENT OF INFORMATION REQUIRED BY 11 U.S.C. §341

INTRODUCTION

Pursuant to the Bankruptcy Reform Act of 1994, the Office of the United States Trustee, United States Department of Justice, has prepared this information sheet to help you understand some of the possible consequences of filing a bankruptcy petition under chapter 7 of the Bankruptcy Code. This information is intended to make you aware of...

- (1) the potential consequences of seeking a discharge in bankruptcy, including the effects on credit history;
- the effect of receiving a discharge of debts (2)
- (3) the effect of reaffirming a debt; and
- (4)your ability to file a petition under a different chapter of the Bankruptcy Code.

There are many other provisions of the Bankruptcy Code that may affect your situation. This information sheet contains only general principles of law and is not a substitute for legal advice. If you have questions or need further information as to how the bankruptcy laws apply to your specific case, you should consult with your lawyer.

WHAT IS A DISCHARGE?

The filing of a chapter 7 petition is designed to result in a discharge of most of the debts you listed on your bankruptcy schedules. A discharge is a court order that says you do not have to repay your debts, but there are a number of exceptions. Debts which may not be discharged in your chapter 7 case include, for example, most taxes, child support, alimony, and student loans; court-ordered fines and restitution; debts obtained through fraud or deception; and personal injury debts caused by driving while intoxicated or taking drugs. Your discharge may be denied entirely if you, for example, destroy or conceal property; destroy, conceal or falsify records; or make a false oath. Creditors cannot ask you to pay any debts which have been discharged. You can only receive a chapter 7 discharge once every eight (8) years.

WHAT ARE THE POTENTIAL EFFECTS OF A DISCHARGE?

The fact that you filed bankruptcy can appear on your credit report for as long as 10 years. Thus, filing a bankruptcy petition may affect your ability to obtain credit in the future. Also, you may not be excused from repaying any debts that were not listed on your bankruptcy schedules or that you incurred after you filed for bankruptcy.

WHAT ARE THE EFFECTS OF REAFFIRMING A DEBT?

After you file your petition, a creditor may ask you to reaffirm a certain debt or you may seek to do so on your own. Reaffirming a debt means that you sign and file with the court a legally enforceable document, which states that you promise to repay all or a portion of the debt that may otherwise have been discharged in your bankruptcy case. Reaffirmation agreements must generally be filed with the court within 60 days after the first meeting of the creditors.

Reaffirmation agreements are strictly voluntary — they are not required by the Bankruptcy Code or other state or federal law. You can voluntarily repay any debt instead of signing a reaffirmation agreement, but there may be valid reasons for wanting to reaffirm a particular debt.

Reaffirmation agreements must not impose an undue burden on you or your dependents and must be in your best interest. If you decide to sign a reaffirmation agreement, you may cancel it at any time before the court issues your discharge order or within sixty (60) days after the reaffirmation agreement was filed with the court, whichever is later. If you reaffirm a debt and fail to make the payments required in the reaffirmation agreement, the creditor can take action against you to recover any property that was given as security for the loan and you may remain personally liable for any remaining debt.

OTHER BANKRUPTCY OPTIONS

You have a choice in deciding what chapter of the Bankruptcy Code will best suit your needs. Even if you have already filed for relief under chapter 7, you may be eligible to convert your case to a different chapter.

Chapter 7 is the liquidation chapter of the Bankruptcy Code. Under chapter 7, a trustee is appointed to collect and sell, if economically feasible, all property you own that is not exempt from these actions.

Chapter 11 is the reorganization chapter most commonly used by businesses, but it is also available to individuals. Creditors vote on whether to accept or reject a plan. which also must be approved by the court. While the debtor normally remains in control of the assets, the court can order the appointment of a trustee to take possession and control of the business.

Chapter 12 offers bankruptcy relief to those who qualify as family farmers. Family farmers must propose a plan to repay their creditors over a three-to-five year period and it must be approved by the court. Plan payments are made through a chapter 12 trustee, who also monitors the debtor's farming operations during the pendency of the plan.

Finally, chapter 13 generally permits individuals to keep their property by repaying creditors out of their future income. Each chapter 13 debtor writes a plan which must be approved by the bankruptcy court. The debtor must pay the chapter 13 trustee the amounts set forth in their plan. Debtors receive a discharge after they complete their chapter 13 repayment plan. Chapter 13 is only available to individuals with regular income whose debts do not exceed \$1,000,000 (\$250,000 in unsecured debts and \$750,000 in secured debts).

AGAIN, PLEASE SPEAK TO YOUR LAWYER IF YOU NEED FURTHER INFORMATION OR EXPLANATION, INCLUDING HOW THE BANKRUPTCY LAWS RELATE TO YOUR SPECIFIC CASE.

/s/ Valerie S. Gangware	February 25, 2008		
Debtor's Signature	Date		

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United States Bankruptcy Court

		Northern District of Illinois		
In re	Valerie S. Gangware		Case No.	
		Debtor(s)	Chapter	7
	VE	ERIFICATION OF CREDITOR I	MATRIX	
		Number o	of Creditors:	128
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of cred	itors is true and	correct to the best of my
Date:	February 25, 2008	/s/ Valerie S. Gangware Valerie S. Gangware		